

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

## Please type or print legibly. Instructions are included on back of application.

## FILED EFFECTIVE

2814 APR 25 AM 9: 21

SECRETARY OF STATE
STATE OF IDAHO

STEP UP PAINTING	
The true name(s) and <u>business</u> address(e business under the assumed business na <u>Name</u>	
EDDIE L COLLINS	1305 N IDAHO ST, POST FALLS, ID 83854
	1000 (4 (6)) 4 (7) (7) (7) (7) (7)
3. The general type of business transacted to Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	on and Public Utilities  Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:  STEP UP PAINTING  1305 N IDAHO ST  POST FALLS, ID 83854	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme	ent
COPY is (if other than # 4 above):	
5,010	Secretary of State upe only
gnature: all	
nted Name: EDDIE L COLLINS	18ANO SECRETARY OF STATE 04/25/2014 05:00
pacity/Title:OWNER	CK:5008 CT:296127 BH:142203
gnature:	16 25.00 = 25.00 ASSUM NAME
nted Name:	
pacity/Title:	D170125

on part i Flor 07/2010